

 COMPLAINT - FOLLOW UP INFORMATIONAL PD 313-081A (Rev. 4-89-31)		G.E.S. CASE CLEARANCES, INITIAL ARREST ON THE COMPLAINT CD. CRIME INCIDENT DATA, USE COMPLAINT FOLLOW-UP (PO 3)						VERED PROPERTY, ADDITIONAL STOLEN PROPERTY (1) TO REPORT THE PRECEDING				
		Crime ASSAULT 1		Pct 043	CCCB No	Complaint No	Date of This Report 2/12/01		PAGE OF PAGE 14			
Date of Orig. Report 2/12/01		Date Assigned 2/12/01	Case No	Unit Reporting Bx. Robbery Sqd.			Follow-Up No					
Complainant's Name - Last, First, M.I. XXXXXXXXX P.S.N.Y.						Victim's Name - If Different						
Last Name, First, M.I. Home Telephone Business Telephone						Address, Include City, State, Zip				Apt. No	PERP 1	
Total No. of Perpetrators <input type="checkbox"/> Wanted <input type="checkbox"/> Arrested		Arrested	Weapon <input type="checkbox"/> Used <input type="checkbox"/> Possessed	Describe Weapon (If firearm, give color, make, calibre, type, model, etc.)						Age	PERP 2	
Wanted <input type="checkbox"/> <input type="checkbox"/>		Arrested	Last Name, First, M.I.	Address, Include City, State, Zip						Apt. No	Res. Pct	
Sex <input type="checkbox"/> Eyeglasses		Race	Date of Birth	Age	Height ft <input type="checkbox"/> in	Weight	Eye Color	Hair Color	Hair Length	Facial Hair	NYSID No	CHOICE 1
Nickname, First Name, Alias <input type="checkbox"/> Sunglasses		Clothing Description Scars, Marks, M.O., Etc. (Continue in "Details")									CHOICE 2	
Wanted <input type="checkbox"/> <input type="checkbox"/>		Arrested	Last Name, First, M.I.	Address, Include City, State, Zip						Apt. No	Res. Pct.	
Sex <input type="checkbox"/> Eyeglasses		Race	Date of Birth	Age	Height ft <input type="checkbox"/> in	Weight	Eye Color	Hair Color	Hair Length	Facial Hair	NYSID No	CHOICE 1
Nickname, First Name, Alias <input type="checkbox"/> Sunglasses		Clothing Description Scars, Marks, M.O., Etc. (Continue in "Details")									CHOICE 2	
AREA WITHIN BOX FOR DETECTIVE / LATENT FINGERPRINT OFFICER ONLY. THIS BOX WILL BE UTILIZED BY INVESTIGATOR WHENEVER POSSIBLE AND MUST BE FULLY COMPLETED WHEN USING THIS FORM TO CLOSE A CASE "NO RESULTS."												
Comp. Interviewed <input type="checkbox"/> Yes <input type="checkbox"/> No		In Person <input type="checkbox"/>	By Phone <input type="checkbox"/>	Date	Time	Results: Same as Comp. Report - Different (Explain in Details) <input type="checkbox"/> <input type="checkbox"/>						CHOICE 1
Witness Interviewed <input type="checkbox"/> Yes <input type="checkbox"/> No		In Person <input type="checkbox"/>	By Phone <input type="checkbox"/>	Date	Time	Results: Same as Comp. Report - Different (Explain in Details) <input type="checkbox"/> <input type="checkbox"/>						CHOICE 2
Canvass Conducted <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes - Make Entry in Body Re. Time, Date, Names, Addresses, Results				Crime Scene Visited <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes - Make Entry in Details Re. Time, Date, Evidence Obtained <input type="checkbox"/> <input type="checkbox"/>				CHOICE 1
Complainant Viewed Photos <input type="checkbox"/> Yes <input type="checkbox"/> No		Refused <input type="checkbox"/>	Future <input type="checkbox"/>	Results								CHOICE 2
Witness Viewed Photos <input type="checkbox"/> Yes <input type="checkbox"/> No		Refused <input type="checkbox"/>	Future <input type="checkbox"/>	Results								CHOICE 1
Crime Scene Dusted <input type="checkbox"/> Yes <input type="checkbox"/> No		By (Enter Results in Details)				Crime Scene Photos <input type="checkbox"/> Yes <input type="checkbox"/> No		By (Enter Results in Details)				CHOICE 2
If Closing Case "No Results," Check Appropriate Box and State Justification in Details: <input type="checkbox"/> C-1 Improper Referral <input type="checkbox"/> C-2 Inaccurate Facts <input type="checkbox"/> C-3 No Evidence / Can't ID <input type="checkbox"/> C-4 Uncooperative Complainant <input type="checkbox"/> C-5 "Leads" Exhausted												
DETAILS: SUBJECT: INTERVIEW OF Mr. Sal Miro STATUS: Case Active												
1. on 2/12/01 at approx. 1630 hrs i interviewed Mr. Sal Miro. Mr. Miro is employed at Parkchester Housing Development in the construction shop. Mr. Miro informed me that he knows security guard Anthony Manganiello who is also employed at Parkchester housing development. Mr. Miro states that in the past he had a conversation with Manganiello where in Manganiello told him that he owned a .22 caliber pistol. Miro further stated that he remembers hearing that the victim and Manganiello had a 'beef' or other disagreement, he does not know the basis for the disagreement. 2. Mr. Miro can be reached at telephone number (718)239-2878. His address is 1610 Metropolitan Ave. Bx. NY apt.M-B. 3. Case Active.												
DEFENDANT'S EXHIBIT 27												
CASE <input type="checkbox"/> ACTIVE <input type="checkbox"/> CLOSED		DATE REVIEWED/CLOSED 2/12		IF ACTIVE, DATE OF NEXT REVIEW 2/12								
REPORTING OFFICER: Det. Dowd		RANK Det.		SIGNATURE Dowd		NAME PRINTED Dowd		TAX REG. NO. 888658		COMMAND BxR/C		
REVIEWING / CLOSING Trace												